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Bib Data Sheet

CONFIRMATION NO. 5006

SERIAL NUMBER 09/610,081	FILING DATE 07/05/2000  RULE	CLASS 358	GROUP ART UNIT 2624	ATTORNEY DOCKET NO. LE9-00-045
<b>APPLICANTS</b>  Sherry Anthony Cook, Lexington, KY;  Joseph Wade Luciano, Lexington, KY; John Anthony Moore, Cincinnati, OH; Brandon Lynn Sataneck, Lexington, KY; James Alan Ward, Mayslick, KY;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/05/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	Examiner's Signature _____ Initials _____	STATE OR  COUNTRY KY	SHEETS  DRAWING 15	TOTAL  CLAIMS 22
INDEPENDENT  CLAIMS 2				
<b>ADDRESS</b> 21972 LEXMARK INTERNATIONAL, INC. INTELLECTUAL PROPERTY LAW DEPARTMENT 740 WEST NEW CIRCLE ROAD BLDG. 082-1 LEXINGTON, KY 40550-0999				
<b>TITLE</b> Printer apparatus with integrated graphical user interface and method for using the same				
FILING FEE	FEES: Authority has been given in Paper		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of	



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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/610,081	<b>FILING DATE</b> 07/05/2000 <b>RULE</b> -	<b>CLASS</b> <del>347</del> 358	<b>GROUP ART UNIT</b> <del>2853</del> 2624	<b>ATTORNEY DOCKET NO.</b> LE9-00-045	
<b>APPLICANTS</b> Sherry Anthony Cook, Lexington, KY ; Joseph Wade Luciano, Lexington, KY ; John Anthony Moore, Cincinnati, OH ; Brandon Lynn Satanek, Lexington, KY ; James Alan Ward, Mayslick, KY ;					
<b>** CONTINUING DATA *****</b> None <i>ky</i>					
<b>** FOREIGN APPLICATIONS *****</b> NONE <i>ky</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/05/2000</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>ky</i>		<b>STATE OR COUNTRY</b> KY	<b>SHEETS DRAWING</b> 15	<b>TOTAL CLAIMS</b> 22	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 21972					
<b>TITLE</b> Printer apparatus with integrated graphical user interface and method for using the same					
<b>FILING FEE RECEIVED</b> 856	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		